

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Healthcare Association of New York State and Allied Associations' Federal PAC (HANYS Federal PAC)

<p>Full Name (Last, First, Middle Initial)  <b>A. Mr. Timothy Reilly</b></p> <p>Mailing Address 78 Litchfield Avenue</p> <p>City State Zip Code          Babylon NY 11702</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          Winthrop University Hospital Director, Reimbursement &amp; Planning</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          350.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          11 / 15 / 2013  <b>Transaction ID : SA11AI.17439</b></p> <p>Amount of Each Receipt this Period          350.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. Mr. Richard Rivera</b></p> <p>Mailing Address 250 Sound Beach Drive</p> <p>City State Zip Code          Mattituck NY 11952</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          Winthrop University Hospital Assistant Vice President</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          600.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          11 / 13 / 2013  <b>Transaction ID : SA11AI.17572</b></p> <p>Amount of Each Receipt this Period          600.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. Ms. Rita Roberts</b></p> <p>Mailing Address 61 Hoffman Street</p> <p>City State Zip Code          Franklin Square NY 11010</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          Winthrop University Hospital Assistant Vice President</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          1000.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          11 / 25 / 2013  <b>Transaction ID : SA11AI.17338</b></p> <p>Amount of Each Receipt this Period          1000.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			1950.00	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				